FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Dr. Ameena Matthews			
(b) Address (number and street)			
(c) City, State, and ZIP Code Tinley Park, IL. GOU77 3. Is This Statement (N) OR (A)			
4 Party Affiliation 5. Office Sought 6. State & District of Candidate IL- &			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE			
7. I hereby designate the following named political committee as my Principal Campaign Committee for the			
NOTE: This designation should be filed with the appropriate office listed in the instructions. (year of election)			
(a) Name of Committee (in full)			
Ameena 4 Congress			
Ameena 4 Congress (b) Address (number and street) 15774 S. La Grange Rd P.O. Box 3911			
15/74 S. La Grunge Rd V.O. Box 3912			
Oxland ParkT. 60462			
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)			
 I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. 			
(a) Name of Committee (in full) Friends For Dr. Ameena			
(b) Address (number and street)			
15774 S. La Crange Kd (c) City, State, and ZIP Code			
Orland Park, IL. 60462			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.			
Signature of Candidate Date			
Duleau 7 100 - 04-21			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.			

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